LIVING SITUATION

Do you now live in a ___rural area, ___small town, ___small city, ___suburb, ___large city?

Do you now live in ___a house, ___an apartment, ___or a condo?

Is it in a retirement community? ___yes, ___no

Do you ___ rent, ___ or own?

How long have you lived where you are now? _____ years _____ months

Please list any moves you made since 1996 (and ones you anticipate in the future) and their reasons.

Please describe any alterations in your home since 1996 (and ones you anticipate in the future) for reasons of health or aging.

How many people live in your household <u>most</u> of the time (including yourself)? _____
Who are they in relation to you? (e.g., partner, child, parent, housemate)

Are there others who live in your household <u>part</u> of the time? ___yes, ___no
If so, who are they in relation to you?

LIFE ENGAGEMENTS

Listed below are several kinds of activities that many people engage in. Please list approximately how much time per week you spent doing each activity about 10 years ago, how much time you spend now, and how much time you would ideally like to spend doing each activity

Hours per week spent doing activity <u>10 YEARS AGO</u>	**Hours per week spend doing activity <u>NOW</u>**	**Hours per week <u>IDEALLY</u> like to spend doing activity**	
			Paid work (e.g., salaried work, self-employment)
			Participation in community or service activities
			Own private pursuits and hobbies
			Informal time with partner
			Informal time with family and friends
			Activities with friends
			Caretaking for adults (who? _____)
			Care of grandchildren
			Care of home

HEALTH

How would you rate your general state of health? ___Poor, ___Below average, ___Average, ___Above average, ___Excellent

We would like to know about your current health concerns. For each of the conditions listed below, please indicate its **seriousness (e.g., threat to life)**, the **degree to which the condition causes you pain,** and the **degree to which the condition interferes with your daily life or your sleep**. Use the following scale to make these ratings: **0= This is not a current health concern, 1=Very mild, 2=Mild, 3=Moderate, 4=Severe, 5=Very severe.** In addition, please describe each condition that you have faced in more detail (e.g., arthritis in knee) and list any medications that you use for the condition. Please also list any other health concerns or medication that you take regularly under "other".

Physical condition	Seriousness (0-5)	Pain (0-5)	Interference (0-5)	Details of condition (please describe)	Medications (please list)
Arthritis					
Back pain					
Cancer					
Cataracts					
Diabetes					
Emotional or mental health problems					
Hearing loss					
Heart conditions					
High blood pressure					
High cholesterol					
Macular degeneration					
Migraine headaches					
Osteoporosis					
Other: 1					
Other: 2					

To what extent do aches and pains make your life less pleasant?	little effect 1	2	3	4	large effect 5
How would you rate your health compared to ten years ago?	much worse 1	2	about the same 3	4	much better 5
How much control do you feel you have over your health?	none at all 1	2	3	4	very much 5
How would you rate your energy level?	(low) 1	2	3	4	5 (high)

How tall are you? _____ **How much do you usually weigh?** _____

How satisfied are you with your physical appearance?	very dissatisfied 1	2	3	4	very satisfied 5

Which of the following do you consider yourself?	___very underweight	___a little underweight	___about right	___a little overweight	___very overweight

What kind of health insurance do you have? (check all that apply)

____ Private health insurance (directly from insurer or through your own/partner's employer or union)?

____ Medicare, or other government health insurance based on age?

____ Medicaid, or other government health insurance based on financial need?

____ Government health insurance for military personnel or veterans?

____ Other (_____)?

How satisfied are you with your health insurance coverage?	not at all 1	2	3	4	very much 5

<u>In the past year</u>, how many times did you visit the dentist? ____ Why?

<u>In the past year</u>, how many times did you visit the doctor? ____ Why?

Have you had surgery <u>since 1997</u>? ___No ___Yes. If yes, what kind and when?

Have you been hospitalized since 1997? ___No ___Yes. If yes, why, when, and for how long?

How satisfied are you with the medical care that you have received from your doctors? very dissatisfied 1 2 3 4 5 very satisfied

What do you like about it?

What do you not like about it?

SOCIAL SUPPORT

Please rate how much you agree with each of the statements below on a scale from 1 (strongly disagree) to 7 (strongly agree).

When I need suggestions on how to deal with a problem, I know someone I can turn to.	1	2	3	4	5	6	7
If I wanted to have lunch with someone, there are plenty of people I could ask.	1	2	3	4	5	6	7
I don't often get invited to do things with others	1	2	3	4	5	6	7
If I need a ride somewhere, there is someone I can call who would come and take me.	1	2	3	4	5	6	7
I feel that there is no one I can share my most private worries and fears with.	1	2	3	4	5	6	7
If I were sick, I could easily find someone to help me out.	1	2	3	4	5	6	7

YOUR PARTNER

At present, my partner works for pay (check one):
____ full-time; ____ part-time; ____ very little or not at all

In most of his/her middle age, my partner worked for pay (check one):
____ full-time; ____ part-time; ____ very little or not at all

Does your partner receive a Social Security check? ____ yes, ____ not yet, ____ not eligible

If yes, what year did he/she first start receiving them? _____

If not yet, what year do you anticipate he/she will begin to receive them? _____

In thinking about your partner's retirement status, which one of the following describes your partner best:

____ Retired (in what year? _____)

____ Partially-retired (since what year? _____)

____ Not yet retired (what year planning to retire? _____)

____ Hopes never to retire

____ The concept of retirement does not apply to my partner.

Please tell us anything we need to know to understand your partner's current work and retirement status and past work history.

If your partner has retired:

How does your partner feel about it? (very dissatisfied) 1 2 3 4 5 (very satisfied)

How do you feel about it? (very dissatisfied) 1 2 3 4 5 (very satisfied)

How would you rate your PARTNER'S general state of health?
___Poor, ___Below average, ___Average, ___Above average, ___Excellent

How would you rate your PARTNER'S energy level? (low) 1 2 3 4 5 (high)

On a scale from 1 (very little) to 5 (very much), to what extent is your partner a person who satisfies your needs for:

____ Intellectual stimulation	____ Reassurance	____ Vitality	____ Good advice
____ Status in the community	____ Making me feel special	____ Security	
____ Appreciation as a sexual partner	____ Companionship	____ Comfort	

Please answer the following questions about your partner on a scale from 1 (not at all) to 5 (very well).

____ How well does your partner understand you: your feelings, your likes and dislikes, problems you may have?

____ How well do you understand your partner?

____ How much do you enjoy spending time with your partner?

____ How often do you disagree about how much to spend on various things?

____ How satisfied are you with the way decisions are made?

Please indicate how true each of the following items is in your relationship with your partner by putting the appropriate number next to the item:

1= not at all true ***2=slightly true*** ***3=somewhat true*** ***4=very true***

___Partner is too bossy or controlling
___You are too bossy or controlling
___Partner wants too much affection
___You want too much affection
___Partner is not sociable
___You are not sociable
___Partner is too dependent
___You are too dependent
___Partner is too independent
___You are too independent
___Partner is tense and irritable
___You are tense and irritable
___Partner's views differ from yours
___Your views differ from partner's
___Partner not happy in sexual relations
___You are not happy in sexual relations
___Partner does not respect you
___You do not respect partner
___Partner is sloppy or disorganized
___You are sloppy or disorganized
___Your partner hides their emotions
___You hide your emotions

___Partner is unpredictable
___You are unpredictable
___Partner is jealous
___You are jealous
___Partner not affectionate and personal enough
___You are not affectionate and personal enough
___Partner doesn't make enough money
___You don't make enough money
___Partner spends too much money
___You spend too much money
___Partner doesn't carry out responsibilities
___You don't carry out responsibilities
___Partner resents your admired qualities
___You resent your partner's admired qualities
___Partner resents your lack of admired qualities
___You resent partner's lack of admired qualities
___Partner is boring
___You are boring
___Your partner is inauthentic, not true to self
___You are inauthentic, not true to self
___Other (what?)_____
_____

Do some things seem more important to a satisfying marriage now than they used to, and do others seem less important? Please explain.

YOUR CHILDREN

If you have children, please describe the nature and frequency of your contact with them, including when and under what circumstances you see or communicate with them (e.g., phone, email).

	Child #1	Child #2	Child #3	Child #4
Date of birth of this child	_____	_____	_____	_____
How emotionally close are you to this child? 1 (not at all) to 5 (very close)	_____	_____	_____	_____
How satisfied are you with how this child is getting along in the world? 1 (very dissatisfied) to 5 (very satisfied)	_____	_____	_____	_____

YOUR GRANDCHILDREN

If you have grandchildren, please describe your contact with them, including when and under what circumstances you see or communicate with them and whether you provide any care.

Is the amount of contact ___too little; ___about right; ___a lot at times but gratifying; ___too much?

How important are <u>you</u> in <u>their</u> lives? (not very important) 1 2 3 4 5 (very important)

How important are <u>they</u> in <u>your</u> life? (not very important) 1 2 3 4 5 (very important)

YOUR FRIENDSHIPS

Below please list the names of three friends in your life (individuals who are important in your life) *other than your partner* and then describe your relationship with them. (If you cannot think of three friends, it is okay to list another type of relationship, such as a sibling or child who plays a major role in your life.)

	Friend 1	Friend 2	Friend 3
First name and last initial			
Describe your relationship (e.g., how your relationship began, things you share or do together)			
How well does this person understand you: your feelings, your likes and dislikes, problems you may have? 1 (not at all) to 5 (very well)			
How satisfied are you with your relationship with this person? 1 (not at all) to 5 (very satisfied)			
How emotionally close are you to this person? 1 (not at all) to 5 (very close)			
How much do you enjoy spending time with this person? 1 (not at all) to 5 (very much)			
How authentic (natural, like the "real me") do you feel when you are with this person? 1 (not at all) to 5 (very authentic)			
How much friction is there in your relationship? 1 (none) to 5 (a lot)			
How much do you keep your emotions to yourself when you are with this person? 1 (not at all) to 5 (a lot)			

ASPECTS OF YOURSELF

Please describe yourself on the following adjectives using the 1-8 scale below. When rating yourself in the first column entitled "Me in General", imagine how the adjectives and phrases are characteristic or uncharacteristic of you in general. Then move on to the last four columns entitled "Me in Specific Roles". Describe how you see yourself in four roles, namely friend (the way you are with your friends), parent (with your children), partner (in your couple relationship), and worker (in paid or unpaid work, whether you are currently working or not), using the same 1-8 scale below. Take a moment and think about yourself in each role then rate how characteristic the adjectives and phrases are of you in that role.

1----------2----------3----------4----------5----------6----------7----------8

Extremely Uncharacteristic | **Somewhat Uncharacteristic** | **Somewhat Characteristic** | **Extremely Characteristic**

	1. Me in General	2. Me in Specific Roles			
		As a friend	As a parent	As a partner	As a worker
Assertive					
Irritable					
Organized					
Flexible					
Cynical					
Reserved, quiet					
Supportive					
Irresponsible					
Creative					
Sympathetic, warm					
Effective					
Conventional					
Insecure					
Feeling bored					
Feeling supported					
Feeling authentic, like the "real me"					
Taking pleasure					
Being stimulated					
Feeling unappreciated					
Keeping my emotions to myself					

WORK

Please give us your work history since 1996.

Date of employment (starting and ending)	Job description and place of work	# hours per week

If you are not working now, do you think you want to go back to work? ___yes, ___maybe, ___no

Whether or not you are working at present, rate the questions below from 1 (not at all) to 5 (very much):

How satisfied are you or were you with your current or most recent work?	1	2	3	4	5
How satisfied are you with your lifetime achievements in work?	1	2	3	4	5
How important is work to your sense of identity?	1	2	3	4	5
How important are contacts with your present (or former) work associates?	1	2	3	4	5

Rate how important each of the following have been in your work life overall, from 1 (not at all important) to 5 (very important):

Being able to provide for my children or relatives.	1	2	3	4	5
Learning that I could be independent and take care of myself.	1	2	3	4	5
Helping people, being a useful person.	1	2	3	4	5
Being able to actualize my potential.	1	2	3	4	5

When in your life was your work most satisfying (e.g., rewarding, fulfilling)? Describe what you found most satisfying. Then indicate when it was least satisfying and describe what you found least satisfying.

Rate how much you experienced each of the following <u>in your work at the time when it was most satisfying</u> (e.g., rewarding, fulfilling), from 1 (very little) to 5 (very much)

A sense of mastery and competence in my work life.	1	2	3	4	5
A sense of personal growth and development.	1	2	3	4	5
Confidence, feeling good with who I was (am).	1	2	3	4	5
Acting with autonomy, able to resist social pressures to think and act in certain ways.	1	2	3	4	5
Gratifying relationships with others.	1	2	3	4	5
Goals and a sense of purpose.	1	2	3	4	5

How has getting older changed your work experience? (If you are not presently working, consider your last years of work.)

Have you encountered any stereotypes about older workers? ____Yes, ____No.
If so, please tell us whether and how you were able to bypass or counteract these stereotypes.

Have you done any volunteer work? ____Yes, ____No.
If so, what was your motivation for getting involved and what did you get out of the experience?

INCOME AND FINANCIAL SECURITY

The next questions about income are very important for understanding the life contexts and challenges that people are facing in older age.

What is your annual overall household income? $_____

How much income comes from:
Income earned by you $_____

Your own Social Security or pension? ___ a major part, ____ some, ____ little or none

Your partner's employment, Social Security, or pension? ___a major part, ___some, ___little or none

Your own or family investments? ___ a major part, ____ some, ____ little or none

How much savings do you have for later life? __none, __a little, __a moderate amount, __a great deal

If you have savings for later life, have you started withdrawing from them yet? ___yes, ___no,

How secure is your overall financial situation? (not at all secure) 1 2 3 4 5 (very secure)

How difficult is it for you to pay your monthly bills?
____not at all difficult, ____ not very difficult, ____somewhat difficult, ____ very difficult

If you have lost (or were to lose) your partner, are you (or would you be) adequately protected and financially secure? Tell us about your experiences and concerns.

Thinking of your financial situation since 1997, to what extent do each of the statements below apply to you? Rate from 1 (not true) to 5 (very true).

___ My work has paid well.

___ My work provided good benefits/pension.

___ I am as financially comfortable as I am because of my partner's financial contribution.

___ I (or we) lost quite a bit in the stock market or in other business transactions.

___ My parents (or other relatives) have helped me financially (e.g., gifts, inheritance, trusts).

___ Making money has not been a high priority in my scheme of things.

___ I'm not good at handling money matters.

___ I have suffered from financial errors or misjudgments.

___ I have learned how to handle money better.

Are there decisions you made about your investments or pensions that you wish had been different? Were there decisions that went well? Please describe.

RETIREMENT

When you are or were considering retiring:

Do/did you anticipate retiring with pleasure?	(not at all)	1	2	3	4	5	(very much)
Do/did you anticipate retiring with worry?	(not at all)	1	2	3	4	5	(very much)
Do/did you avoid thinking about it?	(not at all)	1	2	3	4	5	(very much)

When you retired, or in considering retirement, how much are/ were you influenced by the following factors? Rate from 1 (not at all important) to 5 (very important)

___financial ability to retire
___your health
___your energy level
___retirement status of partner
___health of partner
___health of other family member
___incentives or pension plan from your employer
___financial independence of children
___lack of challenge in work
___little prospect of promotion
___stress or difficulty in work
___downsizing, merger, or uncongenial change at work
___desire to spend time in other ways
___other (please describe)

What sort of planning are you doing or did you do in anticipation of retirement?

Did or does your partner affect your retirement plans? ____yes, _____no. If yes, explain how.

If you have retired, is there planning you did not do that you now realize would have been helpful?

Do you (or did you) expect that you might change as a person after retirement? ___ yes; ___ no.
If yes, how or why?

Do you (or did you) expect that your relations with close others might change after you (or your partner) retired? ___ yes; ___ no**. If yes, how or why?**

<u>If you have retired already</u>:

Rate to what extent your perspectives about yourself or your life have changed	**not at all** 1	2	3	4	**very much** 5

Please explain how or why your perspectives have changed.

Rate to what extent your relations with close others have changed	**not at all** 1	2	3	4	**very much** 5

Please explain how or why your relationships have changed.

WHAT THIS TIME OF MY LIFE IS LIKE

The **period from 60 to 70** is when many people retire or their partners retire. What has this time of life been like for you? Using a 5-point scale, where **1 = very much disagree** and **5 = very much agree**, please indicate to what **extent you regard this time of your life as a time ...**

___full of new possibilities
___fraught with economic worries
___of serenity and gratitude
___of feeling affectionate, loving, caring/warm toward others
___of uncertainty and reevaluation
___of missing the structure of scheduled life
___of feeling proud, a sense of accomplishment, successful
___of loneliness and reduced contacts
___of not finding satisfying ways to spend my time
___of feeling less needed
___of boredom and stagnation
___of stress in relationships
___of feeling "out of things"
___of feeling like a burden to others
___of letting go of negative thoughts and feelings

___of feeling compassion for others
___of feeling awe, amazement, wonder
___to do what I want
___to be with family and friends
___to enjoy life
___to slow down
___to help others
___to develop my inner life
___to do things I haven't done before
___to be less concerned about what others think
___to go downhill
___to do things I've wanted to do more of
___to pull together the meaning of my life
___to stay engaged, active
___to have fun, laugh, feel amused

Do you think the next 10 years are going to be...	much worse		about the same		much better?
	1	2	3	4	5

Please describe any age-related problems that you (or people you know) are having that your local government, employer, church, or other organization could do something to help.

ATTITUDES AND VALUES

Please use the following rating scale to indicate how well each statement describes you.

very uncharacteristic — very characteristic

1 2 3 4 5

_____ I have the sense that I have developed a lot as a person over time.

_____ In general, I feel I am in charge of the situation in which I live.

_____ When I look at the story of my life, I am pleased with how things have turned out.

_____ I judge myself by what I think is important, not by the values of what others think is important.

_____ People would describe me as a giving person, willing to share my time with others.

_____ I enjoy making plans for the future and working to make them a reality.

_____ If I could live my life over, I would change almost nothing.

_____ My future is filled with possibilities.

_____ It is easy to express my true attitudes and feelings during interactions with others.

_____ I am not interested in activities that will expand my horizons.

_____ I do not fit very well with the people and the community around me.

_____ I like most aspects of my personality.

_____ I tend to worry about what other people think of me.

_____ I know that I can trust my friends, and they know they can trust me.

_____ I sometimes feel as if I've done all there is to do in life.

_____ In most ways my life is close to my ideal.

_____ There is still plenty of time left in my life to make new plans

_____ I feel artificial in my interactions with others.

_____ For me, life has been a continuous process of learning, changing, and growth.

_____ I often feel overwhelmed by my responsibilities.

_____ In many ways, I feel disappointed about my achievements in life.

_____ I am not afraid to voice my opinions, even when they are in opposition to the opinions of most people.

_____ Maintaining close relationships has been difficult and frustrating for me.

_____ Some people wander aimlessly through life, but I am not one of them.

_____ So far I have gotten the important things I want in life.

_____ As I get older, I begin to experience that time is limited.

very uncharacteristic very characteristic

1 2 3 4 5

_____ I change myself to get along with others.

_____ I think it is important to have new experiences that challenge how you think about yourself and the world.

_____ The demands of everyday life often get me down.

_____ In general, I feel confident and positive about myself.

_____ I tend to be influenced by people with strong opinions.

_____ I have not experienced many warm and trusting relationships with others.

_____ I am an active person in carrying out the plans I set for myself.

_____ I have high self-esteem.

_____ Many opportunities await me in the future.

_____ I can be myself with others.

_____ I gave up trying to make big improvements or changes in my life a long time ago.

_____ I am quite good at managing the many responsibilities of my daily life.

_____ I have confidence in my own opinions, even if they are contrary to the general consensus.

_____ Most people see me as loving and affectionate.

_____ I used to set goals for myself, but that now seems like a waste of time.

_____ I have the sense that time is running out.

_____ At times, I feel like I am not being the “real me”.

_____ When I think about it, I haven't really improved much as a person over the years.

_____ I am good at juggling my time so that I can fit everything in that needs to get done.

_____ I have a sense of direction and purpose in life.

_____ I am very aware of the limitations in my future.

_____ My behavior is usually an expression of my true inner feelings, attitudes, and beliefs.

_____ There is truth to the saying you can't teach an old dog new tricks.

_____ I generally do a good job of taking care of my personal finances and affairs.

_____ I live life one day at a time and don't really think about the future.

EMOTION AND EMOTION REGULATION

Below is a list of some of the ways you may have felt or behaved during the past month. Please indicate how often you have felt this way during the past month using the 1- 4 scale below.

	Rarely or none of the time	Some or a little of the time	Occasionally or a moderate amount of time	All of the time
I was happy	1	2	3	4
I had trouble keeping my mind on what I was doing	1	2	3	4
I felt depressed	1	2	3	4
I felt that everything I did was an effort	1	2	3	4
I felt hopeful about the future	1	2	3	4
I felt fearful	1	2	3	4
My sleep was restless	1	2	3	4
I was bothered by things that usually don't bother me	1	2	3	4
I felt lonely	1	2	3	4
I could not "get going"	1	2	3	4

Next, we would like to ask you some questions about how you express and control (that is, regulate and manage) your emotions. Although some of the following questions may seem similar to one another, they differ in important ways. Please use the following seven-point scale:

1----------2----------3----------4----------5----------6----------7
strongly <u>disagree</u> neutral strongly <u>agree</u>

____ I tend to control my emotions most of the time.
____ When I want to feel more *positive* emotion (such as joy or amusement), I *change what I'm thinking about*.
____ I'm careful to seek out people or situations that make me have *positive* feelings
____ I keep my emotions to myself.
____ My body reacts very strongly to emotional situations.
____ I'm not good at controlling how I express my emotions in the way I talk or behave.
____ When I want to feel less *negative* emotion (such as sadness or anger), I *change what I'm thinking about*.
____ When I am feeling *positive* emotions, I am careful not to express them.
____ When I'm faced with a stressful situation, I make myself *think about it* in a way that helps me stay calm.
____ I control my emotions by *not expressing them*.
____ I don't spend much time or effort trying to control my emotions.
____ When I want to feel more *positive* emotion, I *change the way I'm thinking* about the situation.
____ I'm careful to avoid people or situations that make me have *negative* feelings.
____ Whenever I feel positive emotions, people can easily see exactly what I am feeling.
____ I control my emotions by *changing the way I think* about the situation I'm in.
____ When I am feeling *negative* emotions, I make sure not to express them.
____ Overall, I have a great deal of control over my emotions.
____ When I'm happy, my feelings show.
____ When I want to feel less *negative* emotion, I *change the way I'm thinking* about the situation.
____ I experience my emotions very strongly.

FEELINGS ABOUT LIFE

We are interested in your experience of life during the last few years. Please rate the items below for your feelings now by circling a number on the 3-point rating scale.

	not at all descriptive	somewhat descriptive	very descriptive
Being selective in what I do.	1	2	3
Liking an active social life.	1	2	3
Being treated as an older person.	1	2	3
Feeling established.	1	2	3
A sense of being my own person.	1	2	3
Intense interest in inner life.	1	2	3
Rebellion against constriction.	1	2	3
Feeling my life is moving well.	1	2	3
Being very much interested in sex.	1	2	3
Feeling secure and committed.	1	2	3
Excitement, turmoil, confusion about my impulses and potential.	1	2	3
Coming near the end of one road and not yet finding another.	1	2	3
Feeling weak, incompetent, or not as strong as other people.	1	2	3
Feeling the limits of what I will be able to accomplish.	1	2	3
Discovering new parts of myself.	1	2	3
Focus on reality--meeting the needs of the day and not being too emotional.	1	2	3
A new level of productivity or effectiveness.	1	2	3
Anxiety that I won't live up to opportunities.	1	2	3
Concern about the health of those close to me.	1	2	3
Religious and philosophical interests.	1	2	3
Bringing both feeling and rationality into decisions.	1	2	3
Feeling needed by people.	1	2	3
A new level of intimacy.	1	2	3
Looking old.	1	2	3
Thinking a lot about death.	1	2	3
Appreciating my complexity.	1	2	3
Influence in my community or area of interest.	1	2	3
Doing things for others and then feeling exploited.	1	2	3
Interest in my family tree or ancestral culture.	1	2	3
More involvement with my parents and siblings.	1	2	3
Appreciation and awareness of older people.	1	2	3
Feeling optimistic and cheerful about the future.	1	2	3

	not at all descriptive	somewhat descriptive	very descriptive
Worry about the children.	1	2	3
Effort to ensure that younger people get their chance to develop.	1	2	3
Searching for a sense of who I am.	1	2	3
Fears of competition with other women.	1	2	3
Wishing I had a wider scope to my life.	1	2	3
Feeling the importance of time's passing.	1	2	3
Feeling my personality is set.	1	2	3
Feeling very much alone.	1	2	3
Realizing larger patterns of meaning or relationship.	1	2	3
Reducing the intensity of my achievement efforts.	1	2	3
More satisfied with what I have, less worried about what I won't get.	1	2	3
Having a wider perspective.	1	2	3
Feeling men aren't interested in me.	1	2	3
Having something to teach young people.	1	2	3
Depression and resentment or disillusionment.	1	2	3
Feeling insightful.	1	2	3
Knowing there are things I'll never do.	1	2	3
Being able to be myself.	1	2	3
Feeling I want to protect and keep what is important to me.	1	2	3
Feeling less attractive than I used to be.	1	2	3
Having more complex mental frameworks into which I fit new experience.	1	2	3
Feeling respected.	1	2	3
Taking longer to learn new things.	1	2	3
Interest in things beyond my own family.	1	2	3
Not being so hard on myself.	1	2	3
Caring more about fewer people.	1	2	3
Feeling passé.	1	2	3
Feeling I understand how the world and other people work.	1	2	3
Feeling powerful.	1	2	3
Feeling I will never get myself together.	1	2	3
Having an accurate view of my powers and limitations.	1	2	3
Knowing what is important and what is trivial.	1	2	3
Feeling more confident.	1	2	3